

PLAYGROUND INSPECTION CERTIFICATION SUMMARY

State of Michigan – Department of Human Services
Bureau of Children and Adult Licensing

FACILITY

Facility Name	Facility Phone Number	
Licensee Name	License Number	
Address	County	
City	State	Zip Code

COMPLIANCE – ALL pieces of equipment on the playground must be listed below. (Use page 2 if additional rows are needed.)

If Complies (C) is checked for the piece of equipment, the piece, including surfaces and use space, **complies** with the Consumer Product Safety Commission's (CPSC) **2010 Edition** of the Handbook for Public Playground Safety. If Doesn't Comply (DC) is checked, the equipment does not comply the CPSC's **2010 Edition** of the Handbook for Public Playground Safety. If Not Applicable (NA) is checked, the piece of equipment was not inspected. This includes equipment not required to be inspected such as residential climbing equipment for children under age 2 approved prior to January 2, 2014, non-climbing residential equipment, equipment the center is not using, or a natural playground area. If Doesn't Comply or Not Applicable are checked, a comment must be included.

Note: Surfacing and use zones must also comply with the **2010 Edition** of the Handbook for Public Playground Safety.

C	DC	NA	Name of Piece of Equipment	Approved for Ages	Comments	Manufacturer (if known)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

Has additional documentation been provided to the licensee such as a narrative report, photos, diagrams, etc.?

☐ Yes ☐ No

PLAYGROUND INSPECTOR INFORMATION

Name of Playground Inspector		Date of Inspection
Name of Company	Phone Number	Email Address
Certification Number	Certifying Organization	Certification Expiration Date
Signature		Date

Department of Human Services (DHS) will not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, sex, sexual orientation, gender identity or expression, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a DHS office in your area.

C	DC	NA	Name of Piece of Equipment	Approved for Ages	Comments	Manufacturer (if known)
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
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